PATENT APPLICATION FEE DETERMINATION RECOF Effective October 1, 2001									10073012					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY			
TOTAL CLAIMS			47				RATE		FEE		RATE	FEE	1	
FOR			NUMBER FILED		NUMB	ER EXTRA	BASIC	FEE	370.00	OR	BASIC FEE	740.00		
TOTAL CHARGEABLE CLAIMS			65 minus 20=		•	2.5	X\$ 9=			OR	X\$18=	810	Ü	
INDEPENDENT CLAIMS			minus 3 =		•	0	X42:	 =		OR	X84=	B		
MULTIPLE DEPENDENT CLAIM PRESENT											+280=		ړ.,	
* If the difference in column 1 is less than zero, enter "0" in column 2								=		OR		280		
								۱L		OR	TOTAL	1830	ł	
2	121/5	(Column 1)	MENDE	Colu		(Column 3)	SMAI	LL	ENTITY	OR	OTHER SMALL I			
AMENUMENI A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	IEST IBER OUSLY FOR	PRESENT EXTRA	RATI	Ė	ADDI- TIONAL FEE	^	RATE	ADDI- TIONAL FEE		
	Total	. 39	Minus	- 6	5	=	X\$ 9	=		OR	X\$18=			
	Independent	. 2	Minus	866	/	-/	X42:	2	7	OR	X84=			
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM /							= /		OR	+280=/			
							10	AL			TOTAL		1	
		(Column 1)		(Colu	mn 2)	(Column 3)	ADDIT. F	EE		,	ADDIT. FEE		1	
ENOMENIO		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST HBER HOUSLY FOR	PRESENT EXTRA	RATI	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	•	Minus	**		=	X\$ 9	İ		OR	X\$18=			
AMEN	Independent	•	Minus	888		=	X42:	=	,	OR	X84=		1	
∢ !	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							_		OR	+280=		1	
							+140			OR	TOTAL		1	
ADDI										JON	ADDIT, FEE		1	
_		(Column 1) CLAIMS			imn 2) Hest	(Column 3)			:	1		1	4	
AMENDMENT C		REMAINING AFTER		NUN	ABER HOUSLY	PRESENT	RAT	F	ADDI- TIONAL		RATE	ADDI- TIONAL		
		AMENDMENT			FOR	EXTRA	1001		FEE			FEE	1	
202	Total	•	Minus	**		×	X\$ 9	=		OR	X\$18=			
	Independent	•	Minus			8	X42:			ОЯ	X84=		1	
۹ -	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							_		OR	+280=		1	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.											1			
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT, FEE										OR	ADDIT. FEE		4	
-	If the "Highest No	umber Previously Fi tiber Previously Pa	Paid For IN TI	HIS SPACE	is less th	an 3, enter "3."			propriate bo	ox in co		<u>.</u>		

Application or Docket Number